

## **United States District Court District of Maine**

## ECF CREDIT CARD BLANKET AUTHORIZATION FORM

<b>Background:</b> This form is used to register credit card information with the Clerk's Office, allowing you to electronically file initial pleadings and other documents requiring a filing fee. Your credit card information will be kept secured and confidential.	Instructions: This form should accompany the ECF Registration Form. This form cannot be submitted electronically. Complete the form on-line, print, sign, and return it to the Clerk's Office at the address below.
Questions? Check our website at www.med.uscourts.gov	
Name as it appears on card:	Name of Attorney Authorized to Use Card:
Card Mailing Address:	
Telephone Number:	E-mail Address:
Credit Card Type: Expiration Date:	Account #:
Please check this box if this form is to replace a previously filed credit card authorization form: ?	
By submitting this account registration form, the undersigned agrees to the following:	
I hereby authorize the U.S. District Court to make charges upon the credit card provided for any applicable fees required in conjunction with filings I make.	
<ol> <li>I understand that this form will be kept on file in the Clerk's Office and will remain in effect until revoked in writing and/or the expiration date of the card has passed. I understand that it is my responsibility to complete a new credit card blanket authorization when the credit card has been renewed or to notify the court if the card has been revoked, canceled, or misplaced.</li> </ol>	
<ol> <li>I understand that in the event any charge against this account is denied, I will be notified immediately to make payment in cash, money order, or certified check.</li> </ol>	
Signature:	Date:
Return this form to: William S. Brownell Clerk, U.S. District Court Attn: ECF Registrations 156 Federal St. Portland, ME 04101	COURT USE ONLY: